

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions

A Public Document

1. Agency Name

City of San Jose

Division, Department, or Region (if applicable)

CMO - Budget Office

Designated Agency Contact (Name, Title)

Jennifer Maguire, Sr. Deputy City Manager

Area Code/Phone Number

408-535-8144

E-mail

webmaster.manager@sanjoseca.gov

Date Stamp

San Jose City Clerk

2017 MAR 30 PM 1:34

EP OTU

California
Form

802

For Official Use Only

☐ Amendment (Must Provide Explanation in Part 3.)

Date of Original Filing: _____
(month, day, year)

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass \$ 16 @ \$126

Event Description: Carrie Underwood Concert Date(s) 09 / 10 / 16 09 / 10 / 16

Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐ If no: _____
Name of Source

Was ticket distribution made at the behest of agency official? Yes ☒ No ☐ If yes: _____
Official's Name (Last, First)

3. Recipients

• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

A.	Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
	City Manager's Budget Office	16	Employee Recognition: Release of 2016-2017 Proposed Budgets (Capital and Operating)
B.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
			Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below:
			Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below:
C.	Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

[Signature] Norberto Dueñas City Manager 3/30/17
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: _____